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CONFIRMATION NO. 4295

SERIAL NUMBER 10/761,989	FILING DATE 01/21/2004 RULE	CLASS 385	GROUP ART UNIT 2883	ATTORNEY DOCKET NO. JIIL06												
APPLICANTS Chi-Tsung Peng, Hsin-Chu City, TAIWAN; Kuo-Hsiang Wen, Hsin-Chu City, TAIWAN; <i>RAI</i>																
** CONTINUING DATA ***** <div style="text-align: center;"><i>NONE RAI</i></div>																
** FOREIGN APPLICATIONS ***** <div style="text-align: center;"><i>NONE RAI</i></div>																
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 04/24/2004																
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; border-bottom: 1px solid black;"> Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Met after Allowance Verified and Acknowledged <div style="display: flex; justify-content: space-between;"> <div style="border-bottom: 1px solid black; width: 60%; text-align: center;">Examiner's Signature</div> <div style="border-bottom: 1px solid black; width: 30%; text-align: center;">Initials</div> </div> </td> <td style="width: 10%; text-align: center; vertical-align: top;"> STATE OR COUNTRY TAIWAN </td> <td style="width: 10%; text-align: center; vertical-align: top;"> SHEETS DRAWING 4 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> TOTAL CLAIMS 5 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> INDEPENDENT CLAIMS 1 </td> </tr> </table>					Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Met after Allowance Verified and Acknowledged <div style="display: flex; justify-content: space-between;"> <div style="border-bottom: 1px solid black; width: 60%; text-align: center;">Examiner's Signature</div> <div style="border-bottom: 1px solid black; width: 30%; text-align: center;">Initials</div> </div>	STATE OR COUNTRY TAIWAN	SHEETS DRAWING 4	TOTAL CLAIMS 5	INDEPENDENT CLAIMS 1							
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ADDRESS J.C. Patents Suite 250 4 Venture Irvine, CA 92618																
TITLE Optical fiber twig tree																
FILING FEE RECEIVED 385	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; vertical-align: top;"> FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: </td> <td style="width: 40%; border: 1px solid black; padding: 2px;"> <input type="checkbox"/> All Fees </td> </tr> <tr> <td></td> <td style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.16 Fees (Filing) </td> </tr> <tr> <td></td> <td style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) </td> </tr> <tr> <td></td> <td style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.18 Fees (Issue) </td> </tr> <tr> <td></td> <td style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> Other _____ </td> </tr> <tr> <td></td> <td style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> Credit </td> </tr> </table>				FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees		<input type="checkbox"/> 1.16 Fees (Filing)		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)		<input type="checkbox"/> 1.18 Fees (Issue)		<input type="checkbox"/> Other _____		<input type="checkbox"/> Credit
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